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MARTIN & FERRARO, LLP

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FACSIMILE TRANSMITTAL

TO:

FROM:

Name: Mail Stop AMENDMENT

Name:

Thomas H. Martin, Esq.

Group Art Unit 3731/Examiner Kathleen Sonnett

Firm: U.S. Patent & Trademark Office

Phone No.: 330-877-2277

Fax No.: 571-273-8300

No. of Pages (including this): 17

Subject: U.S. Patent Application No. 10/706,715

Date:

October 14, 2008

John I. Shipp

Filed: November 12, 2003 SURGICAL LIGATION CLIP

Attorney Docket No. 127.0005-00000

Customer No. 22882 Confirmation No.: 7246 Confirmation Copy to Follow: NO

Message:

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that the attached Transmittal Form (in duplicate; \$104.00 total amount to cover the additional claims fee is to be charged to Deposit Account No. 50-1068) and Amendment are being facsimile transmitted to the U.S. Patent and Trademark Office on October 14, 2008.

Sandra L. Blackmon

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FORM PTO-1083

Attorney Docket No.: 127.0005-00000

Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit:

Examiner:

In re application of:

John I. Shipp

Serial No: 10/706,715 Filed: November 12, 2003

For: SURGICAL LIGATION CLIP

Confirmation No.: 7246

3731

Kathleen C. Sonnett

CENTRAL FAX CENTER

OCT 1 4 2008

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Mail Stop AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment After Final in reply to the Final Office Action dated December 12, 2007 in the above-identified application.

- No additional fee is required.
- Applicant hereby requests a one-month extension of time to respond to the above office action.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUME PREVIOUSLY PAIL		(Col. 3) PRESENT EXTRA*	LG/88		DD'L E DUE
TOTAL CLAIMS FEE	34		32	**	2	LG≔\$52 SM=\$26	\$52	\$ 104
INDEPENDENT CLAIMS FEE	2		3	***	0	LG=\$220 SM=\$110	\$220	\$ 0
FIRST PRESENTATION	OF MULTIPLE DEPENDEN	T CLAIN	ns .			GE ENTITY FE		\$ 0
							TOTAL	\$ 104

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

if the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 if the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- The total amount of \$104.00 to cover the additional claims fee is to be charged to Deposit Account No. 50-1068.
- The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1068. A copy of this sheet is enclosed.
 - Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
 - Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

MARTIN & FERRARO, LLP

Date: October 14, 2008

Thomas H. Martin Registration No. 34,383

1557 Lake O'Plnes Street, NE Hartville, Ohio 44632 Telephone: (330) 877-0700 Facsimile: (330) 877-2030 **FORM PTO-1083**

Attorney Docket No.: 127.0005-00000

Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

John I. Shipp

Serial No: 10/706.715

Filed: November 12, 2003

SURGICAL LIGATION CLIP

Confirmation No.: 7246

Art Unit:

3731

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Kathleen C. Sonnett CENTRAL FAX CENTER Examiner:

OCT 1 4 2008

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TOTAL CLAIMS FEE	34		-	82	\$0	2	LG=\$52 SM=\$26	\$52	\$ 104
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FIRST PRESENTATION	OF MULTIPLE DI	EPENDENT	CLAI	MS			GE ENTITY FEI		\$ 0
								TOTAL	\$ 104

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" in ThiS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" in ThiS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

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Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted, MARTIN & FERRARO, LLP

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Facsimile: (330) 877-2030

Thomas H. Martin Registration No. 34,383

PATENT Attorney Docket No. 127.0005-00000 Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: John I. Shipp	}	Confirmation No.: 7246	CENTRAL FAX CENTE OCT 1 4 2008			
Serial No.: 10/706,715 Filed: November 12, 2003 For: SURGICAL LIGATION CLIP)	Group Art Unit: 3731 Examiner: Kathleen C. Sonnett	UCI 1 4 2000			

Mail Stop AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir.

<u>AMENDMENT</u>

In reply to the Office Action of July 15, 2008, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 9 of this paper.

10/15/2008 HMARZI1 00000024 501068 10706715

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Amendment 10-14-08.doc